## **Measurement Data Reporting Format**

The Measurement Data collected should be reported in a file containing the following elements:

<u>Field</u>	<u>Description</u>								
Address	Street Address where the measurement(s) was taken								
City	City Name								
State	State abbreviation. Please use two letter postal abbreviations (i.e. IL, MO, IA)								
Zip	5 digit zip code. Please do not include the Plus 4 extension								
Start Date/ Time	Date and time test began. MUST BE Formatted: MM/DD/YYY HH:MM. Example 11/21/2005 09:20 AM								
End Date/Time	Date and time test completed. MUST BE Formatted: MM/DD/YYY HH:MM. Example 11/21/2005 09:20 AM								
Location	Location where test was performed. Please use one of the following codes: B for basement, C for above crawlspace, S for above slab, and O for other.								
Location Other Description	If location was specified O, please describe the location. Otherwise enter N/A								
Room Use	List the primary function of the room (i.e. Living, Family, Bedroom)								
Mitigation System	If a mitigation system is currently in use. Enter Y for Yes, N for No.								
Measurement Results	Results of the measurements taken in pCi/L. Enter only the number. The results should be formatted as X.X, do NOT show								
	more than one decimal place (i.e. 4.0 not 4.01)								
Test Type	Indicate the type of test performed using D for Duplicate and S for Simultaneous. If this field does not apply enter N for Not Applicable.								
Device Used	Enter the two letter code for the type of device used for the test (i.e. AC, AT, CR, LS, ES, etc.) Please refer to Appendix C of the Adopted Rule for a complete list of the device types and their associated codes.								
Serial Number	Enter the serial number of the device used.								
Lab or Manufacturer	Lost the lab used or manufacturer of the device (i.e Sun Nuclear, Landauer, Radalink)								
Vents	List the type of permanent vents at the location (i.e. Crawlspace, Fireplace, Fresh air intake) or None.								
Vent Status	Enter a code specifying the status of the permanent vents during the test. Use O for Open, C for Closed, and N for Not Applicable.								
Valid Test	Y for Yes, N for No.								
Invalid Reason	Brief description of why the test was invalid (i.e. Closed house conditions violated, Test tampered with, etc.). If the test was								
	valid enter N for Not Applicable.								
Passive or Active Mitigation	One letter abbreviation describing if mitigation system in active or passive (P or A)								
IEMA Tag Number	The number of the IEMA issued tag on systems installed after November 1, 2009. Should be in the format 12345-6789								

Each measurement taken must be listed as a separate item; DO NOT combine results. The file submitted to the Agency should be an ASCII, comma delimited file. In general, this type of file can be generated by most spreadsheet and database software using the Export or Save As function. For example, if you were using Microsoft Excel, you would select File Save As, and then choose CSV as the file type.

Address	City	State	Zip Code	Start Date/ Time	End Date/ Time	Location	Location Other Description	Room Use	Mitigation System	Result	Test Type	Device Used	Serial #	Lab or Manu.	Vents	Vent Status	Valid Test	Invalid Reason	Passive or Active	IEMA Tag#
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